



**PLACE LABEL HERE**

Institution

Institution No.

Participant's Initials

Participant's I.D. No.

AMENDED DATA  YES

**INSTRUCTIONS:** This sheet is the cover page used for submission of the (SAQ\*-F) questionnaire. This page must be completed by the medical staff (nurse, data manager, physician, etc.) See detailed instructions for TESS questionnaire.

1  **TIME POINT**<sup>(1)</sup>

- 1 Baseline
- 2 12 months from start of treatment
- 3 18 months from start of treatment
- 4 24 months from start of treatment

2  **WAS PATIENT QUESTIONNAIRE COMPLETED?**<sup>(2)</sup>

- 1 No (Skip to question 3)
- 2 Yes

**2A DATE PATIENT QUESTIONNAIRE COMPLETED**

\_\_\_\_ - \_\_\_\_ - \_\_\_\_<sup>(3)</sup>

3  **REASON QUESTIONNAIRE WAS NOT COMPLETED**<sup>(4)</sup>

- 0 Not applicable, questionnaire was completed
- 1 Patient refused due to illness
- 2 Patient refused for other reason, specify \_\_\_\_\_<sup>(5)</sup>
- 3 Patient unable to be contacted
- 4 Institutional error
- 5 Tool not available in patient's language
- 6 Other reason, specify \_\_\_\_\_<sup>(6)</sup>
- 9 Unknown

4  **SPECIFY METHOD OF COMPLETION**<sup>(7)</sup>

- 0 Not applicable (not completed)
- 1 At appointment
- 2 By mail
- 3 By telephone
- 9 Unknown

5  **DID THE PATIENT REQUIRE ANY ASSISTANCE IN COMPLETING THE QUESTIONNAIRE?**<sup>(8)</sup>

- 0 Not applicable (not completed)
- 1 No
- 2 Yes
- 9 Unknown if assistance was given

6  **SPECIFY THE PERSON WHO ASSISTED THE PATIENT**<sup>(9)</sup>

- 0 Not applicable (not completed, no assistance)
- 1 Staff member
- 2 Family
- 3 Other, specify \_\_\_\_\_<sup>(10)</sup>
- 9 Unknown

7  **EXTENT OF ASSISTANCE GIVEN**<sup>(11)</sup>

- 0 Not applicable (not completed, no assistance)
- 1 Read items to patient
- 2 Interpreted items for patient
- 3 Marked items per patient's response
- 4 Combination of above, specify \_\_\_\_\_<sup>(12)</sup>
- 5 Other, specify \_\_\_\_\_<sup>(13)</sup>
- 9 Unknown

\_\_\_\_\_  
**Signature of person completing this form**<sup>(14)</sup>

\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
**Date form completed**<sup>(15)</sup>



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## Toronto Extremity Salvage Score (TESS) Administration of the Questionnaire

### General Guidelines

This questionnaire is designed as a measure of physical disability for patients undergoing limb salvage surgery for musculoskeletal tumours. It is a self-administered questionnaire.

There is an upper extremity and lower extremity version of the questionnaire. It is recommended that study personnel complete the general information and review the instructions and sample questions with the subjects. The subjects can independently answer the remaining questions. Total completion time of the questionnaire averages 10 minutes.

### Scoring

Each question is a measure of the difficulty that the individual has performing the task. The total potential score for an item is a perfect performance score (ie. 5).

The scale has been designed to allow individuals to respond to a non-applicable category on an item if it is not something they perform in their everyday life. Consequently, a total questionnaire score, if desired, would be a standardized score ranging from 0 to 100 calculated by:

$$\frac{\text{sum of the item scores} - \# \text{ items}}{\text{possible score range}} \times 100\%$$

where, sum of the item scores = sum of difficulty responses

# items = items completed excluding the NA response items

possible score range = (5 x #items) - (1 x #items)

### Mail Administration

The TESS questionnaires have been administered by mail and, although formal testing of measurement properties has not been undertaken, patients are able and willing to complete the forms and the scores fall within anticipated ranges.

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**Toronto Extremity Salvage Score  
(Davis, 1996)**

**Upper Extremity Questionnaire  
Lower Extremity Questionnaire**

**Completed by patient at baseline, 12, 18, and 24 months from the start of treatment.**

**Note: only the upper or lower extremity form is completed, not both**

**TESS - UPPER EXTREMITY**

Patient Study ID#: \_\_\_\_\_

Patient Initials: \_\_\_\_\_  
(first/middle/last)

Date of birth: \_\_\_\_\_  
(day/month/year)

Form Completion Date: \_\_\_\_\_  
(day/month/year)

Months from start of treatment    0      Baseline  
    0      12 months  
    0      18 months  
    0      24 months

Site:    1\_\_\_\_ Bone  
          2\_\_\_\_ Soft Tissue

Side of Lesion: 1\_\_\_\_ Right  
                          2\_\_\_\_ Left

Are you:    1\_\_\_\_ right handed  
                  2\_\_\_\_ left handed

The following questions are about activities commonly performed in daily life. Each question asks that you mark each item (as in the examples below) opposite the description that best describes your ability to perform each task during the **past week**. Some activities will be extremely easy for you to do, others will be extremely difficult or impossible.

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**EXAMPLE**

Peeling vegetables is:

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

You should choose the response "impossible to do...." if the activity is **something that you normally do** in your daily activities but are **now unable to do** because of physical limitations such as weakness, stiffness or pain.

If you do not perform an activity as part of your normal lifestyle you would choose the response "888" to indicate that the item is not applicable.

Mark all items ensuring that you choose the description that most accurately describes your abilities in the **past week**.

The following questions ask about your ability to perform activities that are common to everyday life. Considering the amount of difficulty you have performing the activity due to the current problem you are having with your arm, please answer the questions by choosing the answer that best describes your ability to do the activity **over the past week**.

**1) Putting on a pair of pants is:**

- 1\_\_\_ impossible to do.
  - 2\_\_\_ extremely difficult.
  - 3\_\_\_ moderately difficult.
  - 4\_\_\_ a little bit difficult.
  - 5\_\_\_ not at all difficult.
- 888\_\_\_ This task is not applicable for me.

**2) Tying shoe laces is:**

- 1\_\_\_ impossible to do.
  - 2\_\_\_ extremely difficult.
  - 3\_\_\_ moderately difficult.
  - 4\_\_\_ a little bit difficult.
  - 5\_\_\_ not at all difficult.
- 888\_\_\_ This task is not applicable for me.

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**3) Putting on socks or stockings is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**4) Showering is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**5) Dressing my arms and upper body is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**6) Buttoning a shirt is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**7) Tying a tie or a bow at the neck of a blouse is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**8) Putting on make-up or shaving is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**9) Brushing your teeth is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**10) Brushing your hair is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**11) Doing light household chores is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**12) Gardening or yard work is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**13) Preparing and serving meals is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**14) Cutting food while eating is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**15) Drinking from a glass is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**16) Performing heavy household chores is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**17) Going shopping is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**18) Giving or receiving change (ie. coins or bills) is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**19) Carrying a shopping bag or briefcase is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**20) Lifting a box to an overhead shelf is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**21) Turning a key in a lock is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**22) Pushing or pulling open a door is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**23) Writing is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**24) Picking up small items is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**25) Completing my usual duties at work is:** (Work includes a job outside the home or as a homemaker.)

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**26) Working my usual number of hours is:** (Working includes both a job outside the home and as a homemaker.)

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**27) Participating in my usual leisure activities is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**28) Socializing with friends and family is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**29) Participating in my usual sporting activities is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**1) Considering all the activities in which I participate in daily life, I would rate my ability to perform these activities during the past week as:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

**PLACE LABEL HERE****Institution****Institution No.****Participant's Initials****Participant's I.D. No.****2) I would rate myself as being :**

1 \_\_\_\_\_ completely disabled

2 \_\_\_\_\_ severely disabled.

3 \_\_\_\_\_ moderately disabled.

4 \_\_\_\_\_ mildly disabled.

5 \_\_\_\_\_ not at all disabled.

Please comment below on any activities you find difficult to perform or on any other difficulties you experience due to the problem you currently have in your arm that you feel are important and have not been asked about in this questionnaire.

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**Please check to make sure that you have not missed any questions.**

**Thank you for taking the time to answer these questions.**



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TESS - LOWER EXTREMITY

Patient Study ID#: \_\_\_\_\_

Patient Initials: \_\_\_\_\_  
(first/middle/last)

Date of birth: \_\_\_\_\_  
(day/month/year)

Form Completion Date: \_\_\_\_\_  
(day/month/year)

Months from start of treatment	0	Baseline
	0	12 months
	0	18 months
	0	24 months

Site: 1\_\_\_ Bone  
2\_\_\_ Soft Tissue

The following questions are about activities commonly performed in daily life. Each question asks that you mark each item (as in the examples below) opposite the description that best describes your ability to perform each task during the **past week**. Some activities will be extremely easy for you to do, others will be extremely difficult or impossible.

**EXAMPLE**

Riding a bicycle is:

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

You should choose the response "impossible to do..." if the activity is **something that you normally do** in your daily activities but are **now unable to do** because of physical limitations such as weakness, stiffness or pain.

If you do not perform an activity as part of your normal lifestyle you would choose the response "888" to indicate that the item is not applicable.

Mark all items ensuring that you choose the description that most accurately describes your abilities in the **past week**.

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The following questions ask about your ability to perform activities that are common to every day life. Considering the amount of difficulty you have performing the activity due to the current problem you are having with your leg, please answer the questions by choosing the answer that best describes your ability to do the activity **over the past week**.

**1) Putting on a pair of pants is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**2) Putting on shoes is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**3) Putting on socks or stockings is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**4) Showering is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**5) Light household chores such as tidying and dusting are:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**6) Gardening and yard work are:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**7) Preparing and serving meals is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**8) Going shopping is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**9) Heavy household chores such as vacuuming and moving furniture is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**10) Getting in and out of the bath tub is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**11) Getting out of bed is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**12) Rising from a chair is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**13) Kneeling is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**14) Bending to pick something up off the floor is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**15) Walking upstairs is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**16) Walking downstairs is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**17) Driving is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**18) Walking within the house is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**9) Walking outdoors is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**20) Sitting is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**21) Walking up or down hills or a ramp is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**22) Standing upright is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**23) Getting up from kneeling is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**24) Getting in and out of a car is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**25) Participating in sexual activities is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**26) Completing my usual duties at work is:** (Work includes both a job outside the home and as a homemaker.)

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**27) Working my usual number of hours is:** (Working includes both a job outside the home and as a homemaker.)

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**28) Participating in my usual leisure activities is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

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**29) Socializing with friends and family is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**30) Participating in my usual sporting activities is:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

888\_\_\_ This task is not applicable for me.

**1) Considering all the activities in which I participate in daily life, I would rate the ability to perform these activities during the past week as:**

- 1\_\_\_ impossible to do.
- 2\_\_\_ extremely difficult.
- 3\_\_\_ moderately difficult.
- 4\_\_\_ a little bit difficult.
- 5\_\_\_ not at all difficult.

**2) I would rate myself as being :**

- 1\_\_\_ completely disabled
- 2\_\_\_ severely disabled.
- 3\_\_\_ moderately disabled.
- 4\_\_\_ mildly disabled.
- 5\_\_\_ not at all disabled.

Please comment below on any activities you find difficult to perform or on any other difficulties you experience due to the problem you currently have in your leg that you feel are important and have not been asked about in this questionnaire.

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**Please check to make sure that you have answered all the questions.**

**Thank you for taking the time to answer these questions.**